

# 2021 Annual Report Air Medical Transport -UCA 26-8a-203(3)(a)(i)

STATE OF UTAH DIVISION OF FAMILY HEALTH AND PREPAREDNESS BUREAU OF EMERGENCY MEDICAL SERVICES

To: Health & Human Services Interim Committee

From: Utah Department of Health

Subject: Air Medical Transport - Statutorily Required Report

#### **Summary**

The Utah Air Ambulance Committee and the Utah Department of Health are required by statute to issue a report for Utah licensed air ambulance providers. The requirement and information given in this report are for the calendar year 2021.

### **Requested Statistical Information**

The Utah Air Ambulance Committee sent a voluntary questionnaire to the Utah licensed Air Ambulance Providers and a request to the State Insurance Department for insurance claims data in order to include the most correct data with this report.

The following billing information was received from providers for the beginning of 2021:

Table 1. Voluntary Reported Air Ambulance Charges

Provider	Provider submitted response	Rotary Wing Aircraft Rates	Fixed Wing Aircraft Rates	Contractual Insurance Agreements	Balance Billing for Patients
AirMed (University of Utah)	Self-reported	Base Rate: \$17,06.81 Mileage Rate: \$223.50	Base Rate: \$12,093.70 Mileage Rate: \$78.00	Aetna ASA Aetna Standard Network Aetna Utah Connected Network Cigna HMO Cigna PPO DMBA First Choice of Midwest First Choice Health/Health InfoNet	AirMed reports that it does <b>not</b> balance bill patients.

				First Health Leased Network  First Health Workers Compensation  Health Utah Network  Molina MarketPlace  MotivHealth  MultiPlan Network  Northern Nevada Trust Funds (BPA)  PacificSource  PacificSource/Smart Health (IPN)  PEHP Advantage Care  PEHP Preferred Care  PEHP Summit & Summit Exclusive Care  PHCS  Prominence (formerly Saint Mary's)  Regence Federal (FEP)  Regence Traditional  Regence ValueCare  Regence FocalPoint  Regence HPN  Regence Individual & Family  SelectHealth  Southeastern Idaho Physician Network (SIPHO)  Universal Health Network (UHN)  United Options PPO  UUHP Healthy	
				United Options PPO	
Life Flight	Self-reported	Base Rate:	Base Rate: \$		

(Intermountain Health Care)			Mileage Rate: \$		
Classic Air (Owned and Operated by Intermountain Health Care)	·	Mileage	Base rate: \$ Mileage rate: \$		
ROwned by Air Medical		Not provided.	Not provided.	Not provided.	Not provided.
Licensed Air Ambulance Providers which make up	received from any of	Not provided.	Not provided.	Not provided.	Not provided.

<sup>\*</sup>The Utah Department of Health contacted the Insurance Department to inquire about related data for the report. The Insurance Department reported that they do not maintain information listed in Title 26-8a-107(7).

The Utah Department of Health, Office of Health Care Statistics (OHCS) provides the following required information for calendar year 2020:

Table 1. Required Statistics	
Total billed charges for air ambulance flights	\$72,974,906.44
Total number of air ambulance flights	2,020
Number of flights with no patient responsibility for paying part of the charges	1,587 (78.6%)
Number of flights where the patient was responsible for paying all or part of the charges	s 433 (21.4%)
Minimum patient responsibility* (excluding zeros)	\$6
Median patient responsibility* (excluding zeros)	\$1,337
Maximum patient responsibility*	\$57,164

<sup>\*</sup>Note this excludes any balance billing. Last year this was a little more than \$7,000. This year there are three that are much higher at \$57,164 (0350), \$29,565 (0150), \$17,428 (0200). The next is \$8,150 which seems more reasonable, but the \$57,164 might be due to a high deductible plan.

Table 2. Information for Included Air Ambulance Companies				
Company	Number of 2020 claims (Including zeros)	Median patient responsibility* (excluding zeros)		
Intermountain Life Flight	1,184	\$1,432		
AirMed (University Health Care)	313	\$1,420		
Classic Lifeguard (Classic Air Medical)	236	\$1,158		
Guardian Flight (AMRG)	134	\$300		
St Mary's Medical Center	26	NA		
Mercy Air Service	23	\$300		
Rocky Mountain Holdings, LLC	20	\$1,070		
San Juan Regional Medical Center	15	\$1,730		
Life Flight Network LLC	12	\$3,404		
Flagstaff Medical Center	12	\$9,753		
Reach Air Medical Services LLC	8	\$1,674		
St Luke's Regional Medical Center	4	\$1,560		
Other	33	\$1,047		

<sup>\*</sup>Note this excludes any balance billing

Company	Number of 2021 claims	Number of Out of Network Flags
Intermountain Life Flight	433	27 (6.2%)
AirMed (University Health Care)	404	24 (5.9%)
Classic Lifeguard (Classic Air Medical)	90	14 (15.6%)
Mercy Air Service	46	9 (19.6%)
St Mary's Medical Center	28	3 (10.7%)
Rocky Mountain Holdings, LLC	22	7 (31.8%)
San Juan Regional Medical Center	16	1 (6.3%)
Guardian Flight (AMRG)	14	4 (28.6%)
Reach Air Medical Services LLC	7	3 (42.9%)
St Luke's Regional Medical Center	4	0 (0.0%)
Life Flight Network LLC	3	2 (66.7%)

Flagstaff Medical Center	3	1 (33.3%)
Other	40	9 (22.5%)

<sup>\*</sup>Note this is preliminary data for 2021 and only includes about the first half of 2021

## **Analytical Methods**

The following analytical methods were used.

- 1. **Data Source:** The Utah All Payer Claims Database (APCD) contains information from health plans, insurers and other carriers with more than 2,500 Utah covered lives.
- 2. **Definition of an air ambulance flight:** Medical claims using Current Procedural Terminology (CPT) codes A0430, A0431, A0435, and A0436.
- 3. **Claims included/excluded:** Final adjudicated medical claims for an air ambulance flight where the payer was designated as the primary payer, service date in calendar year 2019.
- 4. **Air Ambulance Providers:** We used the National Provider Identifier (NPI) listed on the claim as the billing provider to identify the air ambulance company. If the field is blank, the service provider was used. If both billing and service provider NPIs were blank, the provider name was used. We combined variations in air ambulance names into single entities where appropriate.

#### 5. Financial fields:

- a. Charge (billed) amount The amount that the air ambulance requested to be paid
- **b. Patient responsibility** The total amount that the plan estimates to be the patient's responsibility for the air ambulance service. If a patient has secondary coverage, part or all of this responsibility may be covered by another payer. NOTE however, if the air ambulance is considered out of network the patient may be balance billed (see 5-d below).
- **c.** Calculating medians Since over half of the air ambulance claims have no patient responsibility, the overall median is \$0. The reported medians are conditional medians where all claims with no patient responsibility are excluded.
- **d. Balance Billing:** If a payer does not have a contract with the air ambulance, the patient may be billed for the difference between the billed charge and the allowed amount. This possibility (called "balance billing") is not captured on a medical claim.